

No. C 44971	Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. POCATELLO FREE CLINIC, INC. (THE) STEVEN HURLEY 429 WASHINGTON POCATELLO ID 83201 USA		EMILY SEVERSON 428 S 10TH AVE APT B POCATELLO ID 83201			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	STEVEN HURLEY	429 WASHINGTON	POCATELLO	ID	USA	83201
SECRETARY	KATHY OLSEN	429 WASHINGTON AVE	POCATELLO	ID	USA	83201
5. Organized Under the Laws of: ID C 44971	6. Annual Report must be signed.* Signature: Mindy Hong Name (type or print): Mindy Hong Date: 12/26/2013 Title: Executive Director					
Processed 12/26/2013		* Electronically provided signatures are accepted as original signatures.				